## **FEC** FORM 3

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

For An	Authorized Committee	Office Use Only
1. NAME OF COMMITTEE (in full) USE FEC MA OR TYPE OR	ILING LABEL Example:If typing, type over the lines	
Cathy McMorris for Congress		
ADDRESS (number and street) Box 137		
Check if different		
than previously reported. (ACC)		WA 99210 0137
2. FEC IDENTIFICATION NUMBER \(\pi\)	CITY 🛦	STATE▲ ZIP CODE ▲ STATE ▼ DISTRIC
C00390476	3. IS THIS X NEW (N)	OR AMENDED WA 05
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	(b) 12-Day <b>PRE</b> -Election Report fo	
April 15 Quarterly Report (Q1)	Primary (12P)	General (12G) Runoff (12R)
X July 15 Quarterly Report (Q2)	Convention (12C	) Special (12S)
October 15 Quarterly Report (Q3)	Election on	in the State of
January 31 Year-End Report (YE)	(c) 30-Day <b>POST</b> -Election Report f	or the:
	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election on	in the State of
5. Covering Period 0 4 0 1	2 0 0 6 through	06 30 2006
I certify that I have examined this Report and to the	ne best of my knowledge and belief it is true Peters	e, correct and complete.
Type or Print Name of TreasurerDon_	. 0.0.10	
Signature of Treasurer Electronically Filed by	Don Peters	Date 07 08 2006
NOTE : Submission of false, erroneous, or incom	nplete information may subject the person s	igning this Report to the penalties of 2 U.S.C 437g.
Office Use Only		FEC FORM 3 (Revised 02/2003)